

RECEIVED  
CENTRAL FAX CENTER

FEB 20 2007

---

**TELECOPY**COGNIS CORPORATION  
PATENT DEPT.  
300 BROOKSIDE AVENUE  
AMBLER, PA 19002DATE: Feb. 20, 2007**TO:**Name: Examiner (to be assigned)  
Art Unit 1761**FROM:**Name: John F. Daniels, Esq.  
Patent DepartmentFAX NO: (571) 273-8300

---

NUMBER OF PAGES 9 INCLUDING THIS COVER PAGE.We are transmitting from facsimile machine (215) 628-1345.If you do not receive all the pages indicated above, please call Rose Stowe at (215) 628-1017 between 8:00 A.M. and 5:00 P.M.

\*\*\*\*\*  
THE INFORMATION CONTAINED IN THIS FAX MESSAGE IS INTENDED ONLY FOR THE PERSONAL AND CONFIDENTIAL USE OF THE DESIGNATED RECIPIENT(S) NAMED ABOVE. THIS MESSAGE MAY BE AN ATTORNEY-CLIENT COMMUNICATION, AND AS SUCH IS PRIVILEGED AND CONFIDENTIAL. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT OR AN AGENT RESPONSIBLE FOR DELIVERING IT TO THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT YOU HAVE RECEIVED THIS DOCUMENT IN ERROR, AND THAT ANY REVIEW, DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS MESSAGE IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US BY MAIL. THANK YOU.  
\*\*\*\*\*

RE: Our Case C 2823 PCT/US (Serial No. 10/553,374)

Please find attached a "Request For Correction Of Filing Receipt" in the above-named case.

RECEIVED  
CENTRAL FAX CENTER

FEB 20 2007

PATENT  
Docket No. C 2823 PCT/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Application of  
Le Hen Ferrenbach, et al.

Serial No. 10/553,374

Examiner:

Filed: 08/21/2006

Art Unit: 1761

TITLE: PREPARATIONS FOR ORAL ADMINISTRATION CONTAINING  
PHYSIOLOGICALLY ACTIVE FATTY ACIDS AND OLIGOMER  
PROANTHOCYANIDIN

REQUEST FOR CORRECTION OF FILING RECEIPT

Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

February 20, 2007

Sir:

We hereby request correction of the Filing Receipt for Serial No. 10/553,374 as listed below:

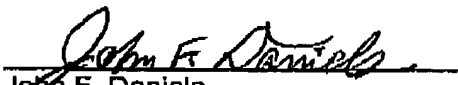
The **FIFTH INVENTOR'S** city of residence should be corrected to read as follows:  
SYBILLE BUCHWALD-WERNER, DUESSELDORF, GERMANY

The **TITLE** in the above referenced application should be corrected to read:

**PREPARATIONS FOR ORAL ADMINISTRATION CONTAINING PHYSIOLOGICALLY  
ACTIVE FATTY ACIDS AND OLIGOMER PROANTHOCYANIDIN**

We thank you for your assistance in this matter.

Respectfully submitted,

  
John F. Daniels  
Reg. No. 34,314  
Attorney for Applicant(s)  
(215) 628-1413

Cognis Corporation, Patent Dept.  
300 Brookside Avenue  
Ambler, PA 19002

Enclosures:

1. Filing Receipt (copy)
2. Executed Declaration (copy)

RECEIVED  
CENTRAL FAX CENTER

Page 1 of 3

JFD/RS

FEB 20 2007



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
10/553,374	08/21/2006	1761	1030	C 2823 PCT/US		13	2

CONFIRMATION NO. 3681

23657

COGNIS CORPORATION  
PATENT DEPARTMENT  
300 BROOKSIDE AVENUE  
AMBLER, PA 19002

## FILING RECEIPT

  
\*OC000000020637267\*

Date Mailed: 10/04/2006

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please mail to the Commissioner for Patents P.O. Box 1450 Alexandria Va 22313-1450. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

## Applicant(s)

Catherine Le Hen Ferrenbach, Meaux, FRANCE;  
Bernd Fabry, Korschenbroich, GERMANY;  
Santiago Rull Prous, Barcelona, SPAIN;  
Christophe Carite, Rilhac-Rancon, FRANCE;  
X Sybille Buchwald-Werner, Düsseldorf, GERMANY;

Power of Attorney: The patent practitioners associated with Customer Number 23657.

## Domestic Priority data as claimed by applicant

This application is a 371 of PCT/EP04/03558 04/03/2004

## Foreign Applications

GERMANY 103171096 04/14/2003

If Required, Foreign Filing License Granted: 09/28/2006

The country code and number of your priority application, to be used for filing abroad under the Paris Convention, is **US10/553,374**

Projected Publication Date: 01/04/2007

RECEIVED COGNIS LAW DEPT.  
ACTION \_\_\_\_\_ INFO \_\_\_\_\_

Non-Publication Request: No

OCT 10 2006

Early Publication Request: No

ENTERED

DUE \_\_\_\_\_  
FILE 11/2/2006

W/INPAT DATABASE

RECEIVED  
CENTRAL FAX CENTER

FEB 20 2007

## Title

X Preparation<sup>s</sup> for oral administration containing physiologically active fatty acids and oligomer proanthocyanidin

## Preliminary Class

426

**PROTECTING YOUR INVENTION OUTSIDE THE UNITED STATES**

Since the rights granted by a U.S. patent extend only throughout the territory of the United States and have no effect in a foreign country, an inventor who wishes patent protection in another country must apply for a patent in a specific country or in regional patent offices. Applicants may wish to consider the filing of an international application under the Patent Cooperation Treaty (PCT). An international (PCT) application generally has the same effect as a regular national patent application in each PCT-member country. The PCT process **simplifies** the filing of patent applications on the same invention in member countries, but **does not result** in a grant of "an international patent" and does not eliminate the need of applicants to file additional documents and fees in countries where patent protection is desired.

Almost every country has its own patent law, and a person desiring a patent in a particular country must make an application for patent in that country in accordance with its particular laws. Since the laws of many countries differ in various respects from the patent law of the United States, applicants are advised to seek guidance from specific foreign countries to ensure that patent rights are not lost prematurely.

Applicants also are advised that in the case of inventions made in the United States, the Director of the USPTO must issue a license before applicants can apply for a patent in a foreign country. The filing of a U.S. patent application serves as a request for a foreign filing license. The application's filing receipt contains further information and guidance as to the status of applicant's license for foreign filing.

Applicants may wish to consult the USPTO booklet, "General Information Concerning Patents" (specifically, the section entitled "Treaties and Foreign Patents") for more information on timeframes and deadlines for filing foreign patent applications. The guide is available either by contacting the USPTO Contact Center at 800-786-9199, or it can be viewed on the USPTO website at <http://www.uspto.gov/web/offices/pac/doc/general/index.html>.

For information on preventing theft of your intellectual property (patents, trademarks and copyrights), you may wish to consult the U.S. Government website, <http://www.stopfakes.gov>. Part of a Department of Commerce initiative, this website includes self-help "toolkits" giving innovators guidance on how to protect intellectual property in specific countries such as China, Korea and Mexico. For questions regarding patent enforcement issues, applicants may call the U.S. Government hotline at 1-866-999-HALT (1-866-999-4158).

**LICENSE FOR FOREIGN FILING UNDER****Title 35, United States Code, Section 184****Title 37, Code of Federal Regulations, 5.11 & 5.15****GRANTED**

The applicant has been granted a license under 35 U.S.C. 184, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" followed by a date appears on this form. Such licenses are issued in all applications where the conditions for issuance of a license have been met, regardless of whether or not a license may be required as set forth in 37 CFR 5.15. The scope and limitations of this license are set forth in 37 CFR 5.15(a) unless an earlier license has been issued under 37 CFR 5.15(b). The license is subject to revocation upon written notification. The date indicated is the effective date of the license, unless an earlier license of similar scope has been granted

under 37 CFR 5.13 or 5.14.

This license is to be retained by the licensee and may be used at any time on or after the effective date thereof unless it is revoked. This license is automatically transferred to any related applications(s) filed under 37 CFR 1.53(d). This license is not retroactive.

The grant of a license does not in any way lessen the responsibility of a licensee for the security of the subject matter as imposed by any Government contract or the provisions of existing laws relating to espionage and the national security or the export of technical data. Licensees should apprise themselves of current regulations especially with respect to certain countries, of other agencies, particularly the Office of Defense Trade Controls, Department of State (with respect to Arms, Munitions and Implements of War (22 CFR 121-128)); the Bureau of Industry and Security, Department of Commerce (15 CFR parts 730-774); the Office of Foreign Assets Control, Department of Treasury (31 CFR Parts 500+) and the Department of Energy.

**NOT GRANTED**

No license under 35 U.S.C. 184 has been granted at this time, if the phrase "IF REQUIRED, FOREIGN FILING LICENSE GRANTED" DOES NOT appear on this form. Applicant may still petition for a license under 37 CFR 5.12, if a license is desired before the expiration of 6 months from the filing date of the application. If 6 months has lapsed from the filing date of this application and the licensee has not received any indication of a secrecy order under 35 U.S.C. 181, the licensee may foreign file the application pursuant to 37 CFR 5.15(b).

RECEIVED  
CENTRAL FAX CENTER

FEB 20 2007

"Express Mail" mailing label number EV530261365US

PTO/SB/01 (8-95)

Approved for use through: 10/31/98 OMB 0651-0032

Type a plus sign (+) inside this box - ☐

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

0010/PTO Rev. 6/95		U.S. Department of Commerce Patent and Trademark Office		Attorney Docket Number	C 2823 PCT/US
<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b>				First Named Inventor	LE HEN FERRENBACH, Catherine
				COMPLETE IF KNOWN	
				Application Number	10/553,374
				Filing Date	08/21/2006
				Group Art Unit	
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing         OR <input type="checkbox"/> Declaration Submitted after Initial Filing				Examiner Name	

As a below named inventor, I hereby declare that:  
My residence, post office address, and citizenship are as stated below next to my name.  
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below)  
of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**PREPARATIONS FOR ORAL ADMINISTRATION CONTAINING PHYSIOLOGICALLY ACTIVE  
FATTY ACIDS AND OLIGOMER PROANTHOCYANIDIN**

(Title of the invention)

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) 04/03/2004 as United States Application Number or PCT International  
Application Number PCT/EP2004/003558 and was amended on (MM/DD/YYYY)                      (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(e)-(4) or §385(b) of any foreign application(s) for patent or inventor's certificate, or §365(e) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
103 17 109.6	DE	04/14/2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.
		<input type="checkbox"/>

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

Express Mail

Label No. EV530261365US

Page 1

02-20-2007 14:17

From-COGNIS CORP., PATENT DEPT.

+215-628-1345

T-442 P.007/009 F-021

Type a plus sign (+) inside this box + ☐

C 2823 PCT/US

DECLARATION		Page 2	
I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365 of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.			
<b>U.S. Parent Application Number</b>	<b>PCT Parent Number</b>	<b>Parent Filing Date (MM/DD/YYYY)</b>	<b>Parent Patent Number (if applicable)</b>
	PCT/EP2004/003558	04/03/2004	
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.			
As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:			
<input type="checkbox"/> Firm Name <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>		<input type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	<input type="checkbox"/> or label <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>
<input checked="" type="checkbox"/> List Attorney(s) and/or agent(s) name and registration number below:			
Name	Registration Number	Name	Registration Number
John F. Daniels	34,314		
Arthur G. Seifert	28,040		
Daniel S. Ortiz	25,123		
<input type="checkbox"/> Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.			
Please direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle; text-align: center;">23657</span>	<input type="checkbox"/> OR <input type="checkbox"/> Fill in correspondence address below
Name <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>		John F. Daniels	
Address <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>			
Address <span style="border: 1px solid black; display: inline-block; width: 150px; height: 1.2em; vertical-align: middle;"></span>			
City <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	State <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	Zip <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	
Country <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	Telephone <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>	215-628-1413	Fax <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle;"></span>
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Catherine	Middle Initial	
Family Name	Le Hen Ferrenbach	Suffix e.g. Jr.	
Inventor's Signature			Date <span style="border: 1px solid black; display: inline-block; width: 100px; height: 1.2em; vertical-align: middle; text-align: center;">12.03.05</span>
Residence: City	Meaux	State	
Country	France	Citizenship	France
Post Office Address	10, rue Louis Braille		
Post Office Address			
City	77100 Meaux	State	
Zip		Country	France
Applicant Authority			
<input checked="" type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto			

Page 2

Type a plus sign (+) inside this box • ☐

C 2823 PCT/US

ADDITIONAL INVENTOR(S) Supplemental Sheet									
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Bernad	Middle Initial		Family Name	Fabry	Suffix e.g. Jr.			
Inventor's Signature	<i>Bernad Fabry</i>				Date	Sept. 08, 2005			
Residence: City	Kerschenbroich	State		Country	Germany	Citizenship	Germany		
Post Office Address	Bruchstrasse 13								
Post Office Address									
City	41362 Kerschenbroich	State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Santiago	Middle Initial		Family Name	Rull Prous	Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City	Barcelona	State		Country	Spain	Citizenship	Spain		
Post Office Address	Francesc Carbonell 32-4a-2°								
Post Office Address									
City	08034 Barcelona	State		Zip		Country	Spain	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Christophe	Middle Initial		Family Name	Carite	Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City	Rilhac-Rancou	State		Country	France	Citizenship	France		
Post Office Address	Cassepierre								
Post Office Address									
City	87570 Rilhac-Rancou	State		Zip		Country	France	Applicant Authority	
Name of Additional Joint Inventor, if any:					<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name	Sybilie	Middle Initial		Family Name	Buchwald-Werner	Suffix e.g. Jr.			
Inventor's Signature	<i>Sybilie Buchwald-Werner</i>				Date	06.09.05			
Residence: City	Duesseldorf	State		Country	Germany	Citizenship	Germany		
Post Office Address	Himmelgelster Landstrasse 100								
Post Office Address									
City	40589 Duesseldorf	State		Zip		Country	Germany	Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									



02-20-2007 14:18

From: COGNIS CORP., PATENT DEPT.

+215-628-1345

T-442 P.009/009 F-021

Type a plus sign (+) inside this box - ☐

C 2823 PCT/US

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Bernd			Middle Initial		Family Name	Fabry		Suffix e.g. Jr.		
Inventor's Signature						Date					
Residence: City	Kerschenbroich			State		Country	Germany		Citizenship	Germany	
Post Office Address	Bruchstrasse 13										
Post Office Address											
City	41352 Kerschenbroich			State		Zip		Country	Germany	Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Santiago			Middle Initial		Family Name	Rull Prous		Suffix e.g. Jr.		
Inventor's Signature						Date	27/3/2006				
Residence: City	Barcelona			State		Country	Spain		Citizenship	Spain	
Post Office Address	Francisco Carbonell 32-4a-2º										
Post Office Address											
City	08034 Barcelona			State		Zip		Country	Spain	Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Christophe			Middle Initial		Family Name	Carite		Suffix e.g. Jr.		
Inventor's Signature						Date	16-09-05				
Residence: City	Rilhac-Rancon			State		Country	France		Citizenship	France	
Post Office Address	Casaesplanne										
Post Office Address											
City	87570 Rilhac-Rancon			State		Zip		Country	France	Applicant Authority	
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Sybille			Middle Initial		Family Name	Buchwald-Werner		Suffix e.g. Jr.		
Inventor's Signature						Date					
Residence: City	Duesseldorf			State		Country	Germany		Citizenship	Germany	
Post Office Address	Himmelgeister Landstrasse 100										
Post Office Address											
City	40589 Duesseldorf			State		Zip		Country	Germany	Applicant Authority	
<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto											